I. LICENSING PROCESS

A. The Application for a License:

An application for a license shall be made on forms provided by the Mississippi Department of Human Services, Division of Family and Children's Services (hereafter known as "the Department"). All inquiries should be made to the:

Attention: Licensure Unit Mississippi State Department of Human Services Division of Family and Children's Services Post Office Box 352 Jackson, MS 39205-0352

(MS Code §43-15-5(2) and §43-15-105 – Licensing Authority – See Appendix)

The applicant will be furnished with an application form and a copy of the Licensing Standards for Child Placing Agencies and Residential Child Caring Agencies (hereafter known as "The Placing Agency").

The following minimum material shall accompany the first application for a license:

- 1. A copy of the Articles of Incorporation and a copy of the Constitution and/or By-laws. Any agency or residential child care facility incorporated outside of the State of Mississippi shall secure authorization from the Secretary of State to do business in Mississippi.
- 2. A completed application form and a letter from the applicant's Board of Directors authorizing the applicant to sign the application
- 3. For-profit agencies must provide information on corporate structure, ownership and proprietary interest.
- 4. A copy of the zoning verification notice signed by the zoning administrator
- 5. A list of the names, addresses, occupations and term expiration of Board Members; and specify the officers of the Board of Directors
- 6. A statement of purpose which includes a description of the geographic area to be served, the types of children to be accepted for placement or care, the services to be provided and the program

objectives

- 7. Verification of six (6) months capital revenue, which shall not include state funds
- 8. A copy of the current budget which shows both expected expenses and sources of income
- 9. A copy of policies regarding fees and charges for services
- 10. A copy of the staff organizational table including names of all employees currently holding those positions
- 11. A general description of each type of staff position proposed for the agency including qualification requirements
- 12. A copy of all policy, including but not limited to, the personnel policies and admission policies
- 13. A copy of the staff development and training plan that must comply with DFCS training requirements (See Section III. Personnel: Staff Development and In-Service Training)
- 14. Certification of occupancy requirements, elevator inspections, occupational safety and health administration codes and all other applicable safety codes
- 15. A copy of the plan for providing care and services
- 16. Copies of all forms used by the agency or residential child care agency such as application and placement agreement
- 17. Certificate of compliance with the civil rights laws
- 18. Most recent audit and IRS Form 990
- 19. A diagram of all structures of the facility showing square footage and designated use of each room and location(s) on campus/grounds of each structure, building codes, and evidence of compliance with applicable codes (Please see Appendix N Checklist)
- 20. A copy of the required fire, health and sanitation (any hazardous condition) inspections completed within the last three months
- 21. Current emergency policies and procedures for all natural or man-

made disasters affecting the facility

22. A copy of current insurance policy coverage including, but not limited to, auto insurance for staff and volunteers who transport children, comprehensive general liability, and owner property insurance on the facility

B. Review of Initial Application:

The Department shall notify the applicant in writing within ten (10) working days acknowledging the receipt of the application. Within thirty (30) working days, the licensing review shall begin. The review shall include on-site interviews, record reading, observation and other interviews. The Department reviews the application, and will notify the applicant, in writing, of the results of the initial review. If additional information/documents are needed for the application process, this will be noted in the response from the Department. The applicant has thirty (30) days to respond, in writing, to information/documents requested, by the Department, to proceed with the application process. If there is no response by the applicant within the thirty (30) calendar days, the Department will proceed with closure of the application.

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Mississippi State Department of Human Services
Division of Family and Children's Services
Post Office Box 352
Jackson, MS 39205-0352

(MS Code §43-15-5(2) and §43-15-105 - Licensing Authority - See

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- 17. Certificate of compliance with the <u>civil rights laws</u> Civil Rights Act of 1964, as amended.
- 18. Most recent audit and IRS Form 990
- 19. A diagram of all structures of the facility showing square footage and designated use of each room and location(s) on campus/grounds of each structure, building codes, and evidence of compliance with applicable codes (Please see Appendix N Checklist)
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(Please see Appendix N – Checklist)

- 21. Current emergency policies and procedures for all natural or manmade disasters affecting the facility (Please see Appendix L for a listing of the topics to be included in your plan.)
- 22. A copy of current insurance policy coverage including, but not limited to, auto insurance for staff who transport children, comprehensive general liability, and owner property insurance on the facility.

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